

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010311

FILED  
Aug 11, 2009  
Secretary of State

**Entity Name:** LUCY STREET NEW TESTAMENT CHURCH OF GOD, INC.

**Current Principal Place of Business:**

20506 N.W. 8TH CT  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

20506 N.W. 8TH CT  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

THE ONE SERVICES  
7161 PEMBROKE RD. #600  
PEMBROKE PINES, FL 33023 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: LISCOMBE, GEDION A PASTOR  
Address: 20506 N.W. 8TH CT  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VP ( ) Delete  
Name: WALDEN, HUGHLAN  
Address: 11004 SW 155 TERR  
City-St-Zip: MIAMI, FL 33157

Title: S ( ) Delete  
Name: POITIER-LISCOMBE, SHERRIE  
Address: 20506 N.W. 8TH CT  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: T ( ) Delete  
Name: WALDEN, CLAUDETTE  
Address: 11004 SW 155 TERR  
City-St-Zip: MIAMI GARDENS, FL 33169

Title: D ( ) Delete  
Name: WALDEN, PHILLIP  
Address: 11004 SW 155 TERR  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERRIE POITIER-LISCOMBE, MS

S

08/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date